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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
MD	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Frank First name A. Middle name McKinney, Jr. Last name and Suffix (Sr., Jr., II, III)		First name K. Middle name McKinney Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Franklin A McKinney, Jr.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9571		xxx-xx-7879

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Frank A. McKinney, Jr.

Debtor 1

Case number (if known) Debtor 2 Ida K. McKinney About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs **EINs** If Debtor 2 lives at a different address: Where you live 9807 Bird River Road Middle River, MD 21220 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code **Baltimore** County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this Over the last 180 days before filing this petition, I petition, I have lived in this district longer than have lived in this district longer than in any other in any other district. district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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	otor 2 Ida K. McKinney	y, o			Case number (if known)	
Par	t 2: Tell the Court About					
7.	The chapter of the Bankruptcy Code you are choosing to file under			of each, see <i>Notice Required by</i> f page 1 and check the appropriat	11 U.S.C. § 342(b) for Individuals Filing for Bankr e box.	uptcy
	choosing to me under	Chapter 7				
		☐ Chapter 11				
		☐ Chapter 12				
		☐ Chapter 13				
8.	How you will pay the fee	about how order. If yo a pre-print	you may pay. Typour attorney is subject address.	oically, if you are paying the fee you mitting your payment on your behavior	k with the clerk's office in your local court for more urself, you may pay with cash, cashier's check, o alf, your attorney may pay with a credit card or cheon, sign and attach the Application for Individuals	r money eck with
				ts (Official Form 103A).	on, sign and attach the Application for marviduals	lo Fay
		but is not that applie	required to, waive so to your family size	your fee, and may do so only if yo ze and you are unable to pay the f	n only if you are filing for Chapter 7. By law, a judg ur income is less than 150% of the official poverty ee in installments). If you choose this option, you Official Form 103B) and file it with your petition.	y line
9.	Have you filed for					
•	bankruptcy within the	■ No.				
	last 8 years?	☐ Yes.	-1	\M/b a.r.	Casa awahaa	
		Distri		When When		
		Distri Distri		When When	Case number Case number	
10.	Are any bankruptcy	■ No				
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.				
		Debte	or		Relationship to you	
		Distri	ct	When	Case number, if known	
		Debte	or		Relationship to you	
		Distri	ct	When	Case number, if known	
11.	Do you rent your	■ No. Go	to line 12.			
	residence?	☐ Yes. Has	your landlord obta	ained an eviction judgment agains	t you?	
			No. Go to line	12.		
			Yes. Fill out In	itial Statement About an Eviction	Judgment Against You (Form 101A) and file it as	part of

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	tor 1 tor 2	Frank A. McKinne Ida K. McKinney	y, Jr.			Case number (if known)
Part	3:	Report About Any Bu	sinesses \	You Own	as a Sole Proprie	ietor
12.	of an	ou a sole proprietor y full- or part-time	■ No.	Go to	Part 4.	
	busir	ness?	П Удс	Name	and location of bus	usiness
	A sole	e proprietorship is a	□ 163.			
	an ind separ as a d	ess you operate as dividual, and is not a rate legal entity such corporation, ership, or LLC.		Name	of business, if any	ny .
	sole p	have more than one proprietorship, use a state sheet and attach		Numbe	er, Street, City, Sta	tate & ZIP Code
		nis petition.		Check	the appropriate bo	box to describe your business:
					Health Care Busin	siness (as defined in 11 U.S.C. § 101(27A))
			port About Any Businesses You Own as a Sole Proprietor a sole proprietor build or part-time is? No. Go to Part 4. Yes. Name and location of business reprietorship is a syou operate as during a sole proprietor build, and is not a legal entity such portation. Name of business, if any Name of business Name of business			
					Stockbroker (as o	defined in 11 U.S.C. § 101(53A))
					Commodity Broke	ker (as defined in 11 U.S.C. § 101(6))
					None of the above	ove
13.	Chap Bank	ou filing under ter 11 of the ruptcy Code and are a small business or?	deadlines operation	s. If you in s, cash-flo	dicate that you are bw statement, and	re a small business debtor, you must attach your most recent balance sheet, statement of
	For a	definition of small	■ No.	I am n	ot filing under Cha	apter 11.
	busin	ess debtor, see 11 C. § 101(51D).	□ No.		ling under Chapter	er 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
			☐ Yes.	I am fi	ling under Chapter	er 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Part	4:	Report if You Own or	Have Any	Hazardo	us Property or An	ny Property That Needs Immediate Attention
14.	proposition alleger of im	ou own or have any erty that poses or is ed to pose a threat minent and	_	What is t	he hazard?	
	publi Or do prope	ifiable hazard to c health or safety? o you own any erty that needs ediate attention?				
	perisi livest or a b	xample, do you own hable goods, or ock that must be fed, building that needs at repairs?		Where is	the property?	
						Number, Street, City, State & Zip Code

	tor 2 Frank A. McKinne tor 2 Ida K. McKinney	, ,	·		Case number (if known)
Par	Explain Your Efforts t	to Re	eceive a Briefing About Credit Counseling		
		Abo	out Debtor 1:	Ab	out Debtor 2 (Spouse Only in a Joint Case):
15.	Tell the court whether you have received a briefing about credit counseling.	You	I must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.	You	u must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.
	The law requires that you receive a briefing about credit counseling before you file for bankruptcy.		Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.		Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
	You must truthfully check one of the following choices. If you cannot do so, you are not eligible to		I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.		I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.
	file. If you file anyway, the court can dismiss your case, you		Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.		Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.
	will lose whatever filing fee you paid, and your creditors can begin collection activities again.		I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver		I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.
			of the requirement. To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances		To ask for a 30-day temporary waiver of the requirement attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.
			required you to file this case. Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a		Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.
			briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you		If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.
			developed, if any. If you do not do so, your case may be dismissed.		Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.
			Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.		
		Ц	I am not required to receive a briefing about credit counseling because of:		I am not required to receive a briefing about credit counseling because of:
			Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.		Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
			Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.		☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
			 Active duty. I am currently on active military duty in a military combat zone. 		Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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	tor 1 Frank A. McKinne tor 2 Ida K. McKinney	y, Jr.			Case nun	nber (if known)			
Part	t 6: Answer These Questi	ons for R	eporting Purposes						
16.	What kind of debts do you have?	16a.				defined in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.						
			Yes. Go to line 17.						
		16b.	Are your debts primarily busineney for a business or investr						
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you owe	e that are not consu	ımer debts or busi	iness debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7.	Go to line 18.					
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do expenses are paid that funds w			property is excluded and administrative ured creditors?			
	administrative expenses are paid that funds will		No						
	be available for distribution to unsecured creditors?		☐ Yes						
18.	How many Creditors do	1 -49		1 ,000-5,000)	1 25,001-50,000			
	you estimate that you owe?	□ 50-99	ı	5001-10,00		50,001-100,000			
		□ 100-1 □ 200-9		□ 10,001-25,0	000	☐ More than100,000			
19.		□ \$0 - \$	550,000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion			
	be worth?		01 - \$100,000		1 - \$50 million	\$1,000,000,001 - \$10 billion			
	9. How much do you estimate your assets to be worth?		001 - \$500,000 001 - \$1 million		1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
20.	How much do you	□ \$0 - \$,	<u></u> \$1,000,001		□ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		001 - \$100,000		1 - \$50 million 1 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion			
		+,	001 - \$500,000 001 - \$1 million		01 - \$500 million	☐ More than \$50 billion			
Part	7: Sign Below								
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.							
		If I have United St	chosen to file under Chapter 7, I tates Code. I understand the relie	am aware that I ma ef available under e	ay proceed, if eligi each chapter, and	ible, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.			
			rney represents me and I did not nt, I have obtained and read the r			s not an attorney to help me fill out this			
		I request	relief in accordance with the cha	apter of title 11, Uni	ted States Code,	specified in this petition.			
			cy case can result in fines up to			ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341,			
		/s/ Fran	ık A. McKinney, Jr.		/s/ Ida K. Mck				
			A. McKinney, Jr. e of Debtor 1		Ida K. McKini Signature of De				
		Executed	d on June 14, 2018		Executed on .	June 14, 2018			
			MM / DD / YYYY			MM / DD / YYYY			

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		Od3C 10 10003 D0	5 1 1 11CG 00/14/10	i agc	7 01 00
	Frank A. McKinne da K. McKinney	y, Jr.		Case nu	mber (it known)
For your at	torney, if you are d by one	under Chapter 7, 11, 12, or 13 of title	e 11, United States Code, and I	have expla	rmed the debtor(s) about eligibility to proceed alone the relief available under each chapter or(s) the notice required by 11 U.S.C. §
	ot represented by , you do not need page.	342(b) and, in a case in which § 707 in the schedules filed with the petition		have no kr	nowledge after an inquiry that the information
		/s/ Douglas R. Gorius	Dat	te Jı	une 14, 2018
		Signature of Attorney for Debtor		M	M / DD / YYYY
		Douglas R. Gorius 25387			
		Douglas P. Gorius PA			
		Douglas R. Gorius, PA			
		511B Eastern Blvd			
		Baltimore, MD 21221-6733 Number, Street, City, State & ZIP Code			
		Contact phone 410-391-0707	Email addre	ess	dgorius.esq@comcast.net

25387 MD Bar number & State

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Fill	Ill in this information to identify your case:			
Deb	ebtor 1 Frank A. McKinney, Jr. First Name Middle Name Last Name	_		
Del	ebtor 2 Ida K. McKinney			
(Spo	pouse if, filing) First Name Middle Name Last Name			
Uni	nited States Bankruptcy Court for the: MD			
Car	ase number			
	known)		☐ Check	if this is an
			ameno	led filing
Su Be a	official Form 106Sum ummary of Your Assets and Liabilities and Certain Statistical Information. Fill out all of your schedules first; then complete the information on this form. If you are ur original forms, you must fill out a new Summary and check the box at the top of this page.	responsible fo	or supplyir	
rai	art 1: Summarize Your Assets			
			Your as	ssets f what you own
	0.1.1.1.4.0.0.0.1.1.5		value e	i mai you omi
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B		\$	159,100.00
	1b. Copy line 62, Total personal property, from Schedule A/B		\$	33,969.04
	1c. Copy line 63, Total of all property on Schedule A/B		\$	193,069.04
Par	art 2: Summarize Your Liabilities			
ı aı	out 2. Communize Four Elabinites			
			Your lia Amount	abilities : you owe
2	Schoolula D. Craditara Who Haya Claima Scaurad by Branarty (Official Form 106D)			•
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of a	Schedule D	\$	221,931.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)			
	3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F		\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F		\$	15,866.00
		ı		
	Your to	tal liabilities	\$	237,797.00
Par	art 3: Summarize Your Income and Expenses			
4.	(= = = /		•	4 764 6E
	Copy your combined monthly income from line 12 of Schedule I		\$	4,761.65
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J		\$	4,872.77
Par	art 4: Answer These Questions for Administrative and Statistical Records			
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the	e court with yo	ur other sc	hedules.
	■ Yes			
7.	-			
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 19		a personal,	family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the fo the court with your other schedules.	rm. Check this	s box and s	ubmit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Debtor 1	Frank A. McKinney, Jr.		
Debtor 2	Ida K. McKinney	Case number (if known)	

 From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

5,890.53

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

		Case 10-100	65 DOCT Filed 06/14/16 Pa	ge 10 01 50	
Fill	in this infor	mation to identify your case and t	his filing:		
Deb	otor 1	Frank A. McKinney, Jr.	le Name Last Name		
	otor 2 use, if filing)	Ida K. McKinney First Name Middl	le Name Last Name		
Uni	ted States Ba	ankruptcy Court for the: MD			
Cas	se number _				Check if this is an amended filing
Sc	hedul	e A/B: Property eparately list and describe items. List a	an asset only once. If an asset fits in more than one c	ategory, list the asset in th	12/15 se category where you thin
		nave any legal or equitable interest in a	her Real Estate You Own or Have an Interest In ny residence, building, land, or similar property?		
1.1		River Road if available, or other description	What is the property? Check all that apply Single-family home Duplex or multi-unit building	amount of any secured cla	
	City	State ZIP Code	Condominium or cooperative Manufactured or mobile home Land Investment property	Current value of the entire property? \$153,700.00	Current value of the portion you own?
			☐ Timeshare ☐ Other Who has an interest in the property? Check one ☐ Debtor 1 only	Describe the nature of y (such as fee simple, ten a life estate), if known. Tenants by the En	ancy by the entireties, or
	County		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item property identification number:	Check if this is com	nmunity property

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Debto Debto		rank A. McK la K. McKinı		y, Jr.				Case	number (if known)		
	f you o	wn or have i	nore	than one, list							
1.2					What	is the	pro	perty? Check all that apply			
		5 Roslyn Ro	ad			Sing	le-fa	imily home	Do not deduct secured of		
_	_ake La				_ 🗆	Dupl	ex c	r multi-unit building	amount of any secured of Creditors Who Have Cla		
S	Street addre	ss, if available, or o	other de	scription		Cond	dom	inium or cooperative	Oreanors who have one	iiiis Secured by i	торену.
					П	Man	ufac	tured or mobile home			
F	Ruther (Glen	VA	22546-0000	_	Lanc			Current value of the entire property?	Current value portion you o	
_	City		State	ZIP Code	_			ent property	\$5,400.00		5,400.00
O	nty .		Otate	211 0000		Time			Ψ0,400.00	. <u> </u>	0,400.00
					_	Othe		Campsite	Describe the nature of		
									(such as fee simple, te a life estate), if known.	nancy by the enti	ireties, or
					Who	has ar	n int	erest in the property? Check one	Joint Tenants Wit	h Right of	
						Debt	or 1	only	Survivorship		
C	Caroline	9				Debt	or 2	only			
С	County				_	Debt	or 1	and Debtor 2 only	☐ Check if this is co	mmunity propert	v
						At le	ast	one of the debtors and another	(see instructions)	minumity propert	y
								ion you wish to add about this item fication number:	ı, such as local		
					.124	4 Ac	res				
	s, vans, lo	•		oort utility vehi	•			G: Executory Contracts and Un	expired Leases.		
– 1	es										
3.1	Make:	Ford			Who has a	n inter	est	in the property? Check one	Do not deduct secured		
	Model:	F150			☐ Debtor	1 only			the amount of any secu Creditors Who Have Cla		
	Year:	2005			☐ Debtor					•	
	Approxim	nate mileage:		193,000	■ Debtor)ehi	or 2 only	Current value of the entire property?	Current value portion you o	
		ormation:						debtors and another		F 7 ·	
					☐ Check	f this	is c	ommunity property	\$2,400.00	\$:	2,400.00
					(see ins	ructions	s)				
3.2	Make:	Jeep			Who has a	n inter	est	in the property? Check one	Do not deduct secured the amount of any secu		
	Model:	Compass			☐ Debtor	1 only			Creditors Who Have Cl		
	Year:	2014			☐ Debtor	2 only			Current value of the	Current value	e of the
	Approxim	nate mileage:		56,000	Debtor	1 and [Debt	or 2 only	entire property?	portion you	
		ormation:						debtors and another		-	
					Check (see ins			ommunity property	\$12,350.00	\$1:	2,350.00

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	tor 1 tor 2	Frank A. Mo Ida K. McKi	• •		Case	number (if known)	
				and other recreational vehicles, other vatercraft, fishing vessels, snowmobiles,			
	No						
	Yes						
4.1	Make	E Terry		Who has an interest in the property? Ch	neck one		claims or exemptions. Put ared claims on Schedule D:
	Mode	el: Camper		☐ Debtor 1 only			laims Secured by Property.
	Year:	1972		Debtor 2 only		Current value of the	Current value of the
				Debtor 1 and Debtor 2 only		entire property?	portion you own?
	Othe	r information:		☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)		\$500.00	\$500.00
.p Part	ages y	ou have attach	ned for Part 2. Write	wn for all of your entries from Part 2, is that number hereethat number hereems ems nterest in any of the following items?			\$15,250.00 Current value of the
							portion you own? Do not deduct secured claims or exemptions.
E	xample No	old goods and es: Major applia Describe		s, china, kitchenware			
	. 00.		Household Go	ods & Furnishings			\$1,000.00
E	l No	es: Televisions		deo, stereo, and digital equipment; comp media players, games ctronics	outers, printers,	scanners; music colle	ections; electronic devices
E	xample No		d figurines; paintings ions, memorabilia, c	s, prints, or other artwork; books, pictures ollectibles	s, or other art ob	ojects; stamp, coin, or	baseball card collections;
E	xample No	ent for sports a es: Sports, phot musical inst Describe	ographic, exercise, a	and other hobby equipment; bicycles, poo	ol tables, golf cl	ubs, skis; canoes and	I kayaks; carpentry tools;
_	l No	oles: Pistols, rifle	es, shotguns, ammur	nition, and related equipment			
•	• res.	Describe	Ithaca Shotgur	1			\$150.00

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Debtor 1 Debtor 2		rank A. Mo la K. McKi		Jr.		Case number (if known)	
☐ No	nples.	: Everyday o	clothes, fur	rs, leather coats, de	signer wear, shoes, accessories		
			Weari	ng Apparel			\$300.00
			Weari	ng Apparel			\$300.00
□ No	nples.	: Everyday j	ewelry, co:	stume jewelry, enga	agement rings, wedding rings, heirl	oom jewelry, watches, gems,	gold, silver
			Jewel	ry			\$175.00
□ No	nples.	animals Dogs, cats	, birds, ho	rses			
			Shih T	Гzu			\$150.00
15. Add for I	I the o	3. Write tha	of all of y t number	your entries from F here	Part 3, including any entries for		\$2,475.00
		oe Your Fina or have any			n any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No	nples.				ome, in a safe deposit box, and on	hand when you file your petiti	
						Cash	\$120.00
17. Depo <i>Exan</i> □ No		Checking,			counts; certificates of deposit; shar s with the same institution, list eac		houses, and other similar
	3				Institution name:		
			17.1.	Checking	TD Bank		\$18.00
			17.2.	Checking	M & T Bank		\$5.87

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Debtor Debtor		A. McKin . McKinne		Jr.		Case number (if known)	
		,	17.3.	Savings	TD Bank		\$60.00
			17.4.	Checking	Wells Fargo		\$3.75
Exa ■ N	a <i>mples:</i> Bor o	nd funds, inv	estme	cly traded stocks ent accounts with b	rokerage firms, money marke	et accounts	
19. No r	es n-publicly to d joint vent	raded stock				businesses, including an interest in an	LLC, partnership,
■ N	-	uie					
□ Ye	es. Give sp	ecific inform		about themne of entity:		% of ownership:	
Ne	gotiable inst n-negotiable	<i>trument</i> s inc	lude p	ersonal checks, ca	notiable and non-negotiable ashiers' checks, promissory no ransfer to someone by signing	otes, and money orders.	
□ Ye	es. Give spe	ecific inform		about them uer name:			
	amples: Inte	pension acerests in IRA			403(b), thrift savings account	s, or other pension or profit-sharing plans	
■ Ye	es. List eacl	h account se		ely. of account:	Institution name:		
		4	401(k	x)	Vanguard		\$11,836.42
		I	Pens	ion	United Steelworke	ers Union	Unknown
You	ur share of a amples: Agr		eposit	s you have made s	so that you may continue serv , public utilities (electric, gas,	ice or use from a company water), telecommunications companies, or	r others
	o es				Institution name or inc	dividual:	
23. Ann ■ N	•	ontract for a	perio	dic payment of mor	ney to you, either for life or for	a number of years)	
	es	Issue	r nam	e and description.			
26 U	.S.C. §§ 53			n an account in a cand 529(b)(1).	qualified ABLE program, or	under a qualified state tuition program.	
■ No	o es	Institu	ıtion r	name and description	on. Separately file the records	of any interests.11 U.S.C. § 521(c):	
		ole or future	e inte	rests in property (other than anything listed in	n line 1), and rights or powers exercisab	ole for your benefit
■ No	-	ecific inform	ation	about them			
	amples: Inte				and other intellectual proper eds from royalties and licensi		

Official Form 106A/B Schedule A/B: Property page 5

 \square Yes. Give specific information about them...

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	ebtor 1 ebtor 2	Frank A. McKinney, Jr. Ida K. McKinney		Case number (if known)	
27.	Exampl ■ No	s, franchises, and other geles: Building permits, exclusiv	e licenses, cooperative association h	noldings, liquor licenses, professional licen	ses
M		roperty owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	■ No	inds owed to you Sive specific information abou	t them, including whether you alread	ly filed the returns and the tax years	ciains of exemptions.
	■ No		nony, spousal support, child support	, maintenance, divorce settlement, propert	ty settlement
30.	Exampl	mounts someone owes you les: Unpaid wages, disability i benefits; unpaid loans you Give specific information	nsurance payments, disability benefi	ts, sick pay, vacation pay, workers' compo	ensation, Social Security
	Interests Example ■ No	s in insurance policies les: Health, disability, or life in	surance; health savings account (HS of each policy and list its value.	SA); credit, homeowner's, or renter's insura	ance
	_ 100.11		y name:	Beneficiary:	Surrender or refund value:
	If you are someon. No		you from someone who has died ust, expect proceeds from a life insu	rance policy, or are currently entitled to red	ceive property because
33.	Exampl ☐ No	es: Accidents, employment d	er or not you have filed a lawsuit of sputes, insurance claims, or rights t		
	Yes. I	Describe each claim			
			checking account see SOFA	udgment creditor in M & T Bank #10	\$4,200.00
	■ No	ontingent and unliquidated Describe each claim	claims of every nature, including	counterclaims of the debtor and rights t	to set off claims
35.	■ No	nncial assets you did not all	eady list		
36			entries from Part 4, including any	entries for pages you have attached	\$16,244.04

5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

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Debtor 1 Debtor 2			Case number (if known)	
37. Do yo	u own or have any legal or equitable interest in any business-relate	ed property?		
No.	Go to Part 6.			
☐ Yes	. Go to line 38.			
	Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	ı Own or Have an Interest	ln.	
	ou own or have any legal or equitable interest in any farn	n- or commercial fishi	ng-related property?	
■ N	lo. Go to Part 7.			
	es. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That Yo	u Did Not List Above		
Exa ■ No	rou have other property of any kind you did not already lise mples: Season tickets, country club membership or seasons. Give specific information	st?		
54. Ad	d the dollar value of all of your entries from Part 7. Write	that number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. Pa	rt 1: Total real estate, line 2			\$159,100.00
56. Pa i	rt 2: Total vehicles, line 5	\$15,250.00		
	rt 3: Total personal and household items, line 15	\$2,475.00		
	rt 4: Total financial assets, line 36	\$16,244.04		
	rt 5: Total business-related property, line 45	\$0.00		
	rt 6: Total farm- and fishing-related property, line 52	\$0.00		
61. Pa i	rt 7: Total other property not listed, line 54	+\$0.00		
62. To t	tal personal property. Add lines 56 through 61	\$33,969.04	Copy personal property total	\$33,969.04
63. To t	tal of all property on Schedule A/B. Add line 55 + line 62			\$193,069,04

	Case 18-1	18065 Doc 1	FIIE	ed 06/14/18 Page 17 o	T 5U
Fil	I in this information to identify your case:				
De	ebtor 1 Frank A. McKinney, Jr.]
D0	First Name Short 2 Ida K. McKinnev	Middle Name	L	ast Name	
1	btor 2 ouse if, filing) Ida K. McKinney First Name	Middle Name	L	ast Name	
Un	ited States Bankruptcy Court for the: MD				
	ise number				☐ Check if this is an amended filing
Oi	fficial Form 106C				
	chedule C: The Prope	erty You Cla	aim	as Exempt	4/16
For spe any fun exe	property you listed on Schedule A/B: Property ded, fill out and attach to this page as many I case number (if known). The each item of property you claim as exempled did amount as exempt. Alternative of applicable statutory limit. Some exemption ds—may be unlimited in dollar amount. Hemption to a particular dollar amount and the applicable statutory amount.	pt, you must specify the ly, you may claim the lons—such as those followever, if you claim and	ne am full fa r heal n exe	age as necessary. On the top of any ount of the exemption you claim. It market value of the property be the aids, rights to receive certain I mption of 100% of fair market value.	one way of doing so is to state a bing exempted up to the amount of benefits, and tax-exempt retirement ue under a law that limits the
	rt 1: Identify the Property You Claim as	Exempt			
1.	Which set of exemptions are you claimin	ng? Check one only, eve	en if y	our spouse is filing with you.	
	■ You are claiming state and federal nonba	ankruptcy exemptions.	11 U.	S.C. § 522(b)(3)	
	☐ You are claiming federal exemptions. 1	1 U.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/	B that you claim as exc	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	2005 Ford F150 193,000 miles Line from Schedule A/B: 3.1	\$2,400.00		\$800.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)
	Line Holli Schedule A.B. 3.1			100% of fair market value, up to any applicable statutory limit	F100. § 11-304(i)(1)(i)(1)
	Household Goods & Furnishings	\$1,000.00		\$1,000.00	Md. Code Ann., Cts. & Jud.
	Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	Proc. § 11-504(b)(4)
	Household Electronics Line from Schedule A/B: 7.1	\$400.00		\$400.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4)
	LINE HOITI Scriedule AVD. 1.1			100% of fair market value, up to any applicable statutory limit	1100. 3 11-004(D)(4)
	Ithaca Shotgun Line from Schedule A/B: 10.1	\$150.00		\$150.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)

Official Form 106C

Wearing Apparel

Line from Schedule A/B: 11.1

\$300.00

100% of fair market value, up to any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

\$300.00

Md. Code Ann., Cts. & Jud.

Proc. § 11-504(b)(4)

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Frank A. McKinney, Jr. Debtor 1 Frank A. McKinn Ida K. McKinney

Drief description of the property and the	Current value of the	Α	ount of the exemption was alsies	Specific lower that all
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
	Schedule A/B	Crie	eck only one box for each exemption.	
Wearing Apparel Line from Schedule A/B: 11.2	\$300.00		\$300.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4)
			100% of fair market value, up to any applicable statutory limit	
Jewelry Line from Schedule A/B: 12.1	\$175.00	•	\$175.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)
Ellie Holli Goriodaio 7 V.B. 1211			100% of fair market value, up to any applicable statutory limit	
Shih Tzu Line from <i>Schedule A/B</i> : 13.1	\$150.00		\$150.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)
Line Holli Schedule Av.B. 19.1			100% of fair market value, up to any applicable statutory limit	1100. § 11 004(1)(1)(1)(1)
Cash Line from Schedule A/B: 16.1	\$120.00		\$120.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)
			100% of fair market value, up to any applicable statutory limit	
Checking: TD Bank Line from Schedule A/B: 17.1	\$18.00		\$18.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)
			100% of fair market value, up to any applicable statutory limit	
Checking: M & T Bank Line from Schedule A/B: 17.2	\$5.87		\$5.87	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)
			100% of fair market value, up to any applicable statutory limit	
Savings: TD Bank Line from Schedule A/B: 17.3	\$60.00		\$60.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)
			100% of fair market value, up to any applicable statutory limit	, and a second
Checking: Wells Fargo Line from Schedule A/B: 17.4	\$3.75		\$3.75	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)
			100% of fair market value, up to any applicable statutory limit	
401(k): Vanguard Line from <i>Schedule A/B</i> : 21.1	\$11,836.42		\$11,836.42	Md. Code Ann., Cts. & Jud. Proc. § 11-504(h)
			100% of fair market value, up to any applicable statutory limit	3 ()
Pension: United Steelworkers Union Line from Schedule A/B: 21.2	Unknown		100%	Md. Code Ann., Cts. & Jud. Proc. § 11-504(h)
			100% of fair market value, up to any applicable statutory limit	
Funds garnished/levied by judgment creditor in M & T Bank checking	\$4,200.00	•	\$4,200.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)
account see SOFA #10 Line from Schedule A/B: 33.1			100% of fair market value, up to any applicable statutory limit	

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Debtoi Debtoi		Frank A. McKinney, Jr. Ida K. McKinney	Case number (if known)	
	•	ou claiming a homestead exemption of more than \$160,375? ct to adjustment on 4/01/19 and every 3 years after that for cases filed on colo	or after the date of adjustment.)	
) Y	es. Did you acquire the property covered by the exemption within 1,215 day	s before you filed this case?	
	Г	1 Yes		

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Fill in this information	on to identify you	r case:				
	rank A. McKinr rst Name	ney, Jr. Middle Name	Last Name			
	la K. McKinney		Lastitatio			
	rst Name	Middle Name	Last Name			
United States Bankrup	otcy Court for the:	MD				
C						
Case number					☐ Check	if this is an
					_	led filing
						3
Official Form 10	<u> 06D</u>					
Schedule D:	Creditors	Who Have Claims	Secure	d by Property	V	12/15
		two married people are filing togethe number the entries, and attach it to the				
1. Do any creditors have	claims secured by	your property?				
☐ No. Check this	box and submit th	nis form to the court with your othe	r schedules. '	You have nothing else	to report on this form.	
Yes. Fill in all o	of the information I	below.		-		
	cured Claims					
		ore than one secured claim, list the cred	ditor congrataly	for Column A	Column B	Column C
each claim. If more than	one creditor has a pa	one than one secured dailin, list the clet articular claim, list the other creditors in er according to the creditor's name.			Value of collateral that supports this claim	Unsecured portion If any
Bay Country C	Consumer					
Finance, Inc.		Describe the property that secures t		\$1,600.00	\$2,400.00	\$0.00
Creditor's Name		2005 Ford F150 193,000 mil	es			
6610 Ditabia L	Jiahway					
6619 Ritchie F Suite 13	nigriway	As of the date you file, the claim is:	Check all that			
Glen Burnie, I	MD 21061	apply. ☐ Contingent				
Number, Street, City, S		☐ Unliquidated				
, , ,	·	☐ Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as car loan)	mortgage or sec	cured		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2	2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
☐ At least one of the deb	,	☐ Judgment lien from a lawsuit	onanie s nem			
Check if this claim recommunity debt		Other (including a right to offset)	Non-Purch	nase Money Securit	y Interest	
Date debt was incurred		Last 4 digits of account numl	ber			
2.2 Caroline Cour	ntv. Virginia	Describe the property that secures t	the claim:	Unknown	\$5,400.00	Unknown
Creditor's Name	,, g	Lot C115 Roslyn Road Lake				
		Ruther Glen, VA 22546 Car				
		County				
		.1244 Acres				
P.O. Box 447		As of the date you file, the claim is: apply.	Check all that			
Bowling Gree	n, VA 22427	Contingent				
Number, Street, City, S	State & Zip Code	Unliquidated				
Who owed the debto	Shook one	Disputed				
Who owes the debt?	DIECK ONE.	Nature of lien. Check all that apply.		ava.d		
☐ Debtor 1 only☐ Debtor 2 only		☐ An agreement you made (such as car loan)	mortgage or sec	cured		
) amb	<u> </u>	ala and the Property			
■ Debtor 1 and Debtor 2 ■ At least one of the debtor 2	-	■ Statutory lien (such as tax lien, med □ Judgment lien from a lawsuit	cnanic's lien)			
☐ At least one of the dec		_	Property T	-ax		
community debt	Jules IV a	Other (including a right to offset)	1 Toporty I	w/1		

Official Form 106D

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Debtor 1 Frank A. McKinney, Jr.		Case number (if know)		
First Name Middle N Debtor 2 Ida K. McKinney	Name Last Name			
First Name Middle N	Name Last Name			
Date debt was incurred	Last 4 digits of account number			
Commonwealth of				
Virginia	Describe the property that secures the claim:	Unknown	\$500.00	Unknown
Creditor's Name	1972 Terry Camper			
Department of Taxation				
PO Box 1115	As of the date you file, the claim is: Check all that apply.			
Richmond, VA 23218	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as mortgage or s car loan)	secured		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
Check if this claim relates to a	S .	Property Tax		
community debt	— Other (including a right to onset)			
Date debt was incurred	Last 4 digits of account number			
Lake Land'Or Property Owners Assn., Inc.	Describe the property that secures the claim:	\$10,000.00	\$5,400.00	\$4,600.00
Creditor's Name	Lot C115 Roslyn Road Lake Land'Or			
	Ruther Glen, VA 22546 Caroline			
	County			
	.1244 Acres As of the date you file, the claim is: Check all that			
555 Welsh Drive	apply.			
Ruther Glen, VA 22546	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or s	ecured		
Debtor 2 only	car loan)	occured		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a	☐ Other (including a right to offset)			
community debt				
Date debt was incurred	Last 4 digits of account number			
Ocwen Loan Servicing,				
2.5 Lic	Describe the property that secures the claim:	\$189,330.00	\$153,700.00	\$35,630.00
Creditor's Name	9807 Bird River Road			
Attn:				
Research/Bankruptcy 1661 Worthington Rd Ste	As of the date you file, the claim is: Check all that			
100 worthington ka Ste	apply.			
West Palm Bch, FL 33409	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or s	secured		
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
It loads one of the debtors and another	— Juaginon non nom a lawoult			

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

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Debtor 1 Frank A. McKinney		Ca	ase number (if know)				
	Middle Name Last Name						
Debtor 2 Ida K. McKinney First Name	/liddle Name Last Name	_					
☐ Check if this claim relates to a community debt	Other (including a right to offset)	Deed of Trus	t				
Opened 02/07 L Active Date debt was incurred 10/31/17	ast	ber <u>3769</u>					
2.6 Santander Consumer USA	Describe the property that secures	the claim:	\$21,001.00	\$12,350.00	\$8,651.00		
Creditor's Name 5201 Rufe Snow Drive Suite 400 North Richland Hills, T 76180 Number, Street, City, State & Zip Cod	Contingent Dunliquidated						
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.						
Debtor 1 only Debtor 2 only		■ An agreement you made (such as mortgage or secured					
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)					
☐ At least one of the debtors and and	other						
☐ Check if this claim relates to a community debt	Other (including a right to offset)	Purchase Mo	oney Security Intere	est			
Opened 3/27/14 Last Ac Date debt was incurred 3/04/18		ber 1000					
-	s in Column A on this page. Write that numl n, add the dollar value totals from all pages.	oer here:	\$221,931.0 \$221,931.0				
Part 2: List Others to Be Notif	fied for a Debt That You Already Listed	i					
to collect from you for a debt you ov	s to be notified about your bankruptcy for a we to someone else, list the creditor in Part u listed in Part 1, list the additional creditors	1, and then list the	collection agency here.	Similarly, if you have m	ore than one		
Name, Number, Street, City, St Chadwick, Washington & Bunn, P.C. 3201 Jermantown Rd. Suite 600 Fairfax, VA 22030	•		ine in Part 1 did you enter ts of account number	the creditor? 2.4			

		Case 1	8-18065	Doc 1	Filed 06/14	4/18 Page	23 01 50		
Fill in	this inform	nation to identify your c	ase:						
Debtor	r 1	Frank A. McKinney	. Jr.						
		First Name	Middle Na	ame	Last Name				
Debtor		Ida K. McKinney							
(Spouse	if, filing)	First Name	Middle N	ame	Last Name				
United	States Bar	kruptcy Court for the:	MD						
Case r	number								
(if known				_					Check if this is an
									amended filing
Offic	ial Earm	106E/F							
			a Hava	Uncopura	d Claims				12/15
		F: Creditors What accurate as possible. Use I				out O for overlitors w	** NONDRIORIT	TV alai	
Schedul D: Credi the Con	le G: Execute itors Who Ha	acts or unexpired leases th ory Contracts and Unexpire ove Claims Secured by Prop ge to this page. If you have	d Leases (Off perty. If more	ficial Form 106G). I space is needed, c	Do not include ar	ny creditors with pa I need, fill it out, nu	rtially secured o	claims in the	that are listed in Schedule
Part 1	List All	of Your PRIORITY Uns	ecured Clai	ms					
1. Do	any creditor	s have priority unsecured	claims agains	t you?					
	No. Go to Pa	art 2.							
	Yes.								
Part 2	List All	of Your NONPRIORITY	Unsecured	Claims					
3. Do	any creditor	s have nonpriority unsecur	ed claims aga	ainst you?					
	No. You have	e nothing to report in this part	. Submit this fo	orm to the court with	n your other sched	dules.			
	Yes.								
cla	im, list the cre	nonpriority unsecured clair editor separately for each clai particular claim, list the other	m. For each cl	aim listed, identify w	what type of claim	it is. Do not list claim	ns already include	ed in Pa	art 1. If more than one
4.1	Caroline	County, Virginia		Last 4 digits of ac	count number	2405			\$383.00
	Nonpriority P.O. Box	Creditor's Name		When was the del	ht incurred?				
		Green, VA 22427		Wilen was the del	ot incurred?				_
		reet City State Zlp Code		As of the date you	u file, the claim is	: Check all that appl	ly		
	Who incur	red the debt? Check one.		☐ Contingent					
	☐ Debtor	1 only		☐ Unliquidated					
	Debtor 2	2 only		☐ Disputed					
	Debtor	1 and Debtor 2 only		Type of NONPRIO	RITY unsecured	claim:			
	☐ At least	one of the debtors and anoth	er	☐ Student loans					
		if this claim is for a commu n subject to offset?	ınity debt	Obligations aris		ration agreement or o	divorce that you d	did not	
	■ No			☐ Debts to pension	on or profit-sharing	g plans, and other sir	milar debts		
	☐ Yes			Other. Specify	Campgrour	nd Taxes			

Best Case Bankruptcy

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	or 1 Frank A. McKinney, Jr. or 2 Ida K. McKinney		Case number (if know)				
4.2	Diversified Consultants, Inc.	Last 4 digits of account number	5344	\$670.00			
	Nonpriority Creditor's Name Diversified Consultants, Inc. Po Box 551268	When was the debt incurred?	Opened 12/15/17				
	Jacksonville, FL 32255 Number Street City State Zlp Code	As of the date you file, the claim i	e. Chack all that apply				
	Who incurred the debt? Check one.	_	5. Опеск ан шасарру				
	☐ Debtor 1 only	☐ Contingent					
	■ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	Disputed	I alaim.				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	i ciaim:				
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not				
	No	Debts to pension or profit-sharin	g plans, and other similar debts				
	☐ Yes	■ Other Specify Collection	• .				
4.3	ERC/Enhanced Recovery Corp	Last 4 digits of account number	1215	\$546.00			
	Nonpriority Creditor's Name 8014 Bayberry Rd Jacksonville, FL 32256	When was the debt incurred?	Opened 03/16				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	☐ Unliquidated					
	Debtor 2 only		☐ Disputed Type of NONPRIORITY unsecured claim:				
	☐ Debtor 1 and Debtor 2 only	•					
	☐ At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing					
	Yes	Other. Specify Collection	Attorney At T Mobility				
4.4	I C System Inc	Last 4 digits of account number	1001	\$175.00			
	Nonpriority Creditor's Name 444 Highway 96 East P.O. Box 64378	When was the debt incurred?	Opened 09/14				
	St. Paul, MN 55164 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	_	or onook all that apply				
	☐ Debtor 1 only	☐ Contingent					
	■ Debtor 2 only	Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	Jalaim.				
	☐ At least one of the debtors and another	i Ciaiiii.					
	☐ Check if this claim is for a community debt	ration agreement or divorce that you did not					
	Is the claim subject to offset?	- Obligations alloting out of a coparation agroc					
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	□Yes	Other. Specify Collection Assoc	Attorney Mercy Anesthesiology				

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	r1 Frank A. McKinney, Jr. r2 Ida K. McKinney		Case number (if know)	
4.5	Kohls/Capital One Nonpriority Creditor's Name	Last 4 digits of account number	4962	\$587.00
	Kohls Credit Po Box 3120	When was the debt incurred?	Opened 11/12 Last Active 1/05/14	
	Milwaukee, WI 53201 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	or or one an unat apply	
	Debtor 1 only			
	■ Debtor 2 only			
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	i ciaim:	
	☐ Check if this claim is for a community debt			
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Charge Ac	count	
4.6	Lake Land'Or Property Owners Association	Last 4 digits of account number		\$10,362.00
	Nonpriority Creditor's Name c/o Chadwick Washington Moriarty Elmore			
	& Bunn P.C. 201 Concourse Blvd. Suite 101 Glen Allen, VA 23059			
	Number Street City State ZIp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one. ☐ Debtor 1 only			
	Debtor 2 only			
	_	☐ Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	I claim:	
	At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Virginia Ca	mpsite Judgment	
4.7	Midland Funding	Last 4 digits of account number	2795	\$476.00
	Nonpriority Creditor's Name 2365 Northside Dr Ste 300 San Diego, CA 92108	When was the debt incurred?	Opened 10/15	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	☐ Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	l claim:	
	☐ At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	g plans, and other similar debts	
		Factoring (Company Account Capital One	
	Yes	Other. Specify Bank Usa I	N.A	

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	Frank A. McKinney, Jr. Ida K. McKinney		Case number (if know)			
4.8	Midnight Velvet	Last 4 digits of account number	029O	\$88.00		
	Nonpriority Creditor's Name Swiss Colony/Midnight Velvet 1112 7th Ave	When was the debt incurred?	Opened 02/13			
	Monroe, WI 53566 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	_	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	l claim:			
	At least one of the debtors and another	☐ Student loans				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	☐ Yes	Other. Specify Charge Acc	count			
4.9	National Recovery Agency Nonpriority Creditor's Name	Last 4 digits of account number	2964	\$97.00		
	Attn: Bankruptcy Po Box 67015	When was the debt incurred?	Opened 2/08/17			
	Harrisburg, PA 17106 Number Street City State Zlp Code	As of the date you file, the claim i				
	Who incurred the debt? Check one.	☐ Contingent				
	■ Debtor 1 only	☐ Unliquidated				
	☐ Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans				
	☐ Debtor 1 and Debtor 2 only					
	☐ At least one of the debtors and another					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	 ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts 				
	No					
	Yes	■ Other. Specify 10 Aqua Services Inc Virginia				
4.10	National Recovery Agency	Last 4 digits of account number	1950	\$92.00		
	Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred?	Opened 2/08/17			
	Po Box 67015		<u> </u>			
	Harrisburg, PA 17106					
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts				
	Debtor 2 only					
	Debtor 1 and Debtor 2 only					
	At least one of the debtors and another					
	☐ Check if this claim is for a community debt Is the claim subject to offset?					
	■ No					
	Yes	Other. Specify 10 Aqua Se	ervices Inc Virginia			

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Debtor 2 Ida K. I	A. McKinney, Jr. McKinney					
	Recovery Agency	Last 4 digits of account number	1546	\$61.00		
Attn: Bar Po Box 6	7015	When was the debt incurred?	Opened 2/08/17			
Number Stre	rg, PA 17106 eet City State Zlp Code	As of the date you file, the claim i	s: Check all that apply			
_	ed the debt? Check one.	☐ Contingent				
Debtor 1	•	☐ Unliquidated				
Debtor 2	,	☐ Disputed				
Debtor 1	and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:			
☐ At least of	one of the debtors and another	☐ Student loans				
	this claim is for a community debt subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
■ No		Debts to pension or profit-sharing	g plans, and other similar debts			
☐ Yes		Other. Specify 10 Aqua Se	ervices Inc Virginia			
	Recovery Agency Creditor's Name	Last 4 digits of account number	6329	\$60.00		
Attn: Bar Po Box 6	nkruptcy 7015	When was the debt incurred?	Opened 2/08/17			
	rg, PA 17106 eet City State Zlp Code	As of the date you file, the claim i	s. Chack all that apply			
	ed the debt? Check one.	_	S. Officer all that apply			
■ Debtor 1		☐ Contingent ☐ Unliquidated				
	•					
	☐ Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Debtor 1 and Debtor 2 only					
	one of the debtors and another	Type of NONPRIORITY unsecured claim: Student loans				
_						
	this claim is for a community debt subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
■ No		Debts to pension or profit-sharin	g plans, and other similar debts			
☐ Yes		Other. Specify 10 Aqua Se	ervices Inc Virginia			
	Recovery Agency Creditor's Name	Last 4 digits of account number	1520	\$60.00		
Attn: Bar Po Box 6	nkruptcy	When was the debt incurred?	Opened 2/08/17			
	rg, PA 17106 eet City State Zlp Code	As of the date you file, the claim i	a. Check all that apply			
	ed the debt? Check one.	As of the date you file, the claim i	5. Спеск ан так арру			
Debtor 1		☐ Contingent				
Debtor 2	•	☐ Unliquidated				
_	•	☐ Disputed				
	and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:			
_	one of the debtors and another	Student loans				
	this claim is for a community debt subject to offset?	report as priority claims	ration agreement or divorce that you did not			
■ No		☐ Debts to pension or profit-sharin				
☐ Yes	☐ Yes ☐ Other. Specify 10 Aqua Services Inc Virginia					

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	T1 Frank A. McKinney, Jr. T2 Ida K. McKinney		Case number (if know)				
4.14	National Recovery Agency	Last 4 digits of account number	2552	\$60.00			
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 67015	When was the debt incurred?	Opened 2/08/17				
	Harrisburg, PA 17106 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	_	☐ Contingent					
	Debtor 1 only	☐ Unliquidated					
	Debtor 2 only	☐ Disputed					
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	I claim:				
	☐ At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify 10 Aqua Se	ervices Inc Virginia				
4.15	National Recovery Agency Nonpriority Creditor's Name	Last 4 digits of account number	3359	\$60.00			
	Attn: Bankruptcy Po Box 67015	When was the debt incurred?	Opened 2/08/17				
	Harrisburg, PA 17106 Number Street City State Zlp Code	As of the date you file, the claim i	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	Пол					
	Debtor 1 only	Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	☐ At least one of the debtors and another						
	☐ Check if this claim is for a community debt						
	Is the claim subject to offset?						
	■ No	Debts to pension or profit-sharin	□ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify 10 Aqua Se	ervices Inc Virginia				
4.16	National Recovery Agency	Last 4 digits of account number	3706	\$60.00			
	Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred?	Opened 2/08/17				
	Po Box 67015	mon was the dest meaned.	Opened 2700/17				
	Harrisburg, PA 17106						
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Debtor 2 only						
	☐ Debtor 1 and Debtor 2 only						
	\square At least one of the debtors and another						
	☐ Check if this claim is for a community debt Is the claim subject to offset?						
	■ No						
	Yes	■ Other. Specify 10 Aqua Services Inc Virginia					

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	Frank A. McKinney, Jr. Ida K. McKinney		Case number (if know)			
4.17	Profburcol	Last 4 digits of account number	1768	\$312.00		
	Nonpriority Creditor's Name 5295 Dtc Parkway	When was the debt incurred?	Opened 7/10/17			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
	☐ Debtor 2 only	☐ Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	l claim:			
	☐ At least one of the debtors and another	☐ Student loans				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	■ Other Specify 11 Verizon				
4.18	Receivable Management Inc	Last 4 digits of account number	1052	\$686.00		
-	Nonpriority Creditor's Name 7206 Hull Rd Ste 211	When was the debt incurred?	Opened 06/14			
	Richmond, VA 23235					
	Number Street City State ZIp Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	☐ Unliquidated ☐ Disputed				
	Debtor 2 only					
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:				
	☐ At least one of the debtors and another	☐ Student loans				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	■ Other. Specify Collection	Attorney Patient First			
4.19	Recovery One Llc	Last 4 digits of account number	617D	\$125.00		
	Nonpriority Creditor's Name 3240 Henderson Rd	When was the debt incurred?	Opened 11/16			
	Columbus, OH 43220 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.	П Оtit				
	☐ Debtor 1 only	☐ Contingent				
	■ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	l claim:			
	☐ At least one of the debtors and another	Student loans				
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	■ Other. Specify Returned Check Safelite Autoglass				
		— Other. Specify				

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	r 1 Frank A. r 2 Ida K. Mo	McKinney, Jr. cKinney		Case n	umber (if know)		
4.20	Verizon		Last 4 digits of account number	0001		\$583.00	
	Nonpriority Creditor's Name Verizon Wireless Bk Admin 500 Technology Dr Ste 550 Weldon Springs, MO 63304		When was the debt incurred?	Open 8/18/	ned 09/16 Last Active		
	Number Street	City State Zlp Code	As of the date you file, the claim is	: Check	all that apply		
	_	the debt? Check one.	☐ Contingent				
	Debtor 1 on	·	☐ Unliquidated				
	Debtor 2 on		☐ Disputed				
		d Debtor 2 only	Type of NONPRIORITY unsecured	claim:			
		e of the debtors and another	☐ Student loans				
		is claim is for a community debt ibject to offset?	Obligations arising out of a sepa report as priority claims	ration agr	reement or divorce that you did not		
	■ No		Debts to pension or profit-sharing	g plans, a	and other similar debts		
	Yes		Other. Specify				
4.21	Verizon		Last 4 digits of account number	0001		\$323.00	
	500 Techno	ess Bankrupty Admin ology Dr Ste 500	When was the debt incurred?		ned 05/16 Last Active 1/16	•	
		city State Zlp Code	As of the date you file, the claim is	s: Check	all that apply		
	Who incurred	the debt? Check one.	Contingent				
	■ Debtor 1 on	ıly	□ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts				
	Debtor 2 on	ıly					
	Debtor 1 an	d Debtor 2 only					
	At least one	e of the debtors and another					
		is claim is for a community debt ibject to offset?					
	■ No	•					
	Yes		Other. Specify				
trying	his page only if y	you for a debt you owe to someone	t your bankruptcy, for a debt that you else, list the original creditor in Par	ts 1 or 2,	r listed in Parts 1 or 2. For example, if , then list the collection agency here. here. If you do not have additional pe	Similarly, if you have	
		or 2, do not fill out or submit this pa					
		mounts for Each Type of Unse certain types of unsecured claims.		orting p	urposes only. 28 U.S.C. §159. Add the	e amounts for each type	
					Total Claim		
Tetal	6a.	Domestic support obligations		6a.	\$ 0.00		
Total c		Taxes and certain other debts yo	u owe the government	6b.	\$ 0.00		
	6c.	• •		6c.	\$ 0.00		
	6d.	Other. Add all other priority unsecu	red claims. Write that amount here.	6d.	\$		
	6e.	Total Priority. Add lines 6a through	h 6d.	6e.	\$		
					Total Claim		
Total c	6f.	Student loans		6f.	\$ 0.00		
from F			ration agreement or divorce that you	6g.	\$ 0.00		
	6h.	did not report as priority claims Debts to pension or profit-sharin	g plans, and other similar debts	6h.	\$ 0.00		
	6i.	•	secured claims. Write that amount here		\$ 15,866.00		

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Frank A. McKinney, Jr. Ida K. McKinney		Case number (if know)			
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	15,866.00

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Fill in this infor	mation to identify yo	ur case:		
Debtor 1	Frank A. McKin			
	First Name	Middle Name	Last Name	
Debtor 2	lda K. McKinne	ey .		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the	e: MD		
Case number				
(if known)				☐ Check if this i
				amended filin

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

F	Person or	company with Name, Number	whom you have the Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.3	City		State	ZIF Code	
2.0	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.5	,		<u> </u>		
	Name				_
	Number	Street			_

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	Odoc	710 10000 200	1 1100 00/11/	io rago oo or	
Fill in this i	nformation to identify you	r case:			
Debtor 1	Frank A. McKinr	ney, Jr.			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	Ida K. McKinney	Middle Name	Last Name		
	es Bankruptcy Court for the:				
0 1					
Case number	er				☐ Check if this is an amended filing
Official	Form 106H				
		Jahtara			
Scheal	ule H: Your Cod	ieptors			12/15
•	und case number (if known ou have any codebtors? (I	,		e as a codebtor.	
■ No □ Yes					
	in the last 8 years, have yo , California, Idaho, Louisiana				y states and territories include
	So to line 3. Did your spouse, former sp	ouse, or legal equivalent liv	ve with you at the time?		
in line 2 Form 1	2 again as a codebtor only	if that person is a guara	ntor or cosigner. Make	sure you have listed th	g with you. List the person shown ne creditor on Schedule D (Officia Schedule E/F, or Schedule G to
	olumn 1: Your codebtor ame, Number, Street, City, State and	ZIP Code		Column 2: The cre Check all schedule	ditor to whom you owe the debt s that apply:
3.1				☐ Schedule D, line	1
	ame			□ Schedule E/F, li	
				☐ Schedule G, line	
Ni Ci	umber Street ity	State	ZIP Code	_	
3.2				☐ Schedule D, line	
	ame			Schedule E/F, li	
				☐ Schedule G, line	
N	umber Street			_	
Ci	ity	State	ZIP Code		

Fill in this informa	ation to identify your case:	
Debtor 1	Frank A. McKinney, Jr.	
Debtor 2 (Spouse, if filing)	Ida K. McKinney	
United States Bar	nkruptcy Court for the: MD	
Case number (If known)		Check if this is: An amended filing A supplement showing postpetition chapter
Official Fo	orm 106I	13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job, attach a separate page with information about additional employers.	Empleyment status	■ Employed	☐ Employed
		Employment status	☐ Not employed	■ Not employed
		Occupation	Steelworker	
	Include part-time, seasonal, or self-employed work.	Employer's name	Precoat Metals Division of Sequa Corp.	
	Occupation may include student or homemaker, if it applies.	Employer's address	6754 Santa Barbara Court Elkridge, MD 21075	
		How long employed th	nere? 4 years	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

- 3. Estimate and list monthly overtime pay.
- 4. Calculate gross Income. Add line 2 + line 3.

		For Debtor 1		For Debtor 2 or non-filing spouse			
2.	\$	5,617.73	\$	0.00			
3.	+\$	0.00	+\$	0.00			
4.	\$	5,617.73	\$_	0.00			

Official Form 106I Schedule I: Your Income page 1

Debt Debt		Frank A. McKinney, Jr. Ida K. McKinney		С	Case number (<i>if kr</i>	nown) _			
					For Debtor 1			For Debto		
	Cor	by line 4 here	4.		\$ 5,617	7.73	 }	\$	0.00	
5.	•	all payroll deductions:			<u> </u>		_		0.00	
J.					ф 4.00г	- ~-		Ф	0.00	
	5a. 5b.	Tax, Medicare, and Social Security deductions	5a. 5b.		\$ 1,265 \$ 337		_	\$	0.00	
	5c.	Mandatory contributions for retirement plans Voluntary contributions for retirement plans	5c.		:		_	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.		·	0.00 0.00	_	\$	0.00	
	5e.	Insurance	5e.		\$ 186		_	\$	0.00	
	5f.	Domestic support obligations	5f.		<u> </u>	0.00	_	\$	0.00	
	5g.	Union dues	5g.		·	0.00	_	\$	0.00	
	5h.	Other deductions. Specify: Ad&D	5h.⊣		·	2.69	_		0.00	
		Dental	_		·	9.79	_	\$	0.00	
		Ltd	_			1.18	_	\$	0.00	
		Optional Life	_			5.39	_	\$	0.00	
		Vision			\$	9.32	?	\$	0.00	
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	;	\$ 1,848	3.08	3	\$	0.00	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	;	\$3,769	9.65	<u>;</u>	\$	0.00	
8.	8a. 8b. 8c. 8d. 8e. 8f.	profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify:	8c. 8d. 8e. 8f. 8f. 8h.	+	\$ (0 \$ (0 \$ (0) \$ (0) \$ (0) \$ (0) \$ (0)).00).00).00).00).00).00))))) +		0.00 0.00 0.00 992.00 0.00 0.00	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	5	0.00	<u> </u>	\$	992.00	
10.		culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	_	3,769.65	+	\$_	992.00	= \$	4,761.65
11.	othe Do	te all other regular contributions to the expenses that you list in <i>Schedule</i> ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depe					ed in <i>Sched</i>	ule J. . +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certailies							\$Combin	4,761.65 ned
13.	Do	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	?							y income
	_	•					—			

Official Form 106I Schedule I: Your Income page 2

Sill	in this informa	ation to identify yo	our case.									
	otor 1			r		Che	eck if this is:					
	Frank A. McKinney, Jr.					An amended filing						
Deb	otor 2	Ida K. McKin	ney					wing postpetition chapter				
(Spo	ouse, if filing)						13 expenses as of	the following date:				
Unit	ed States Bank	ruptcy Court for the:	MD				MM / DD / YYYY					
Cas	e number											
(lf kı	nown)											
Of	fficial Fo	orm 106J										
		J: Your I	Exner	1888				12/15				
Be info nur	as complete ormation. If n mber (if know	and accurate as	possible eded, atta	. If two married people a ich another sheet to this				or supplying correct				
Par		ribe Your House	hold									
1.	Is this a joi											
	□ No. Go to	o line 2. es Debtor 2 live i	in a conar	ata hausahald?								
			iii a Sepai	ate nousenoid?								
	■ N		st file Offic	ial Form 106J-2, <i>Expense</i>	s for Separate House	ehold of De	ebtor 2.					
2.	Do you hav	re dependents?	□ No									
	Do not list D		Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?				
	Do not state	e the						□ No				
	dependents	names.			Granddaughte	r	3	Yes				
								□ No				
					Grandson		15	Yes				
								□ No				
								☐ Yes ☐ No				
								☐ Yes				
3.	Do your ex	penses include		No				1 103				
		of people other the dependent	han 🗖	Yes								
D				h. P								
exp	imate your e	a date after the b	our bankr	uptcy filing date unless	you are using this fo plemental <i>Schedule</i>	orm as a s e J, check	supplement in a Chathe top of	apter 13 case to report of the form and fill in the				
the		h assistance and		government assistance cluded it on <i>Schedule I:</i>			Your exp	enses				
,		,										
4.		or home owners nd any rent for the		ses for your residence. or lot.	Include first mortgage	4.	\$	994.00				
	If not inclu	ded in line 4:										
	4a. Real	estate taxes				4a.	\$	0.00				
		erty, homeowner's				4b.	·	0.00				
		e maintenance, re				4c.		75.00				
5.		eowner's associat mortgage payme		our residence, such as ho	ome equity loans	4d. 5.	·	0.00 0.00				
			,	,								

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Debtor 1 Debtor 2		. McKinney, Jr. IcKinney	Case numb	per (if known)	
		•		_	
	ities:		•	•	
6a.		/, heat, natural gas	6a.	· -	185.00
6b.		ewer, garbage collection	6b.	\$	13.00
6c.		e, cell phone, Internet, satellite, and cable services	6c.	·	220.00
6d.	Other. Sp		6d.	·	0.00
		sekeeping supplies	7.	\$	625.00
_		children's education costs	8.	\$	950.00
. Clot	thing, laund	dry, and dry cleaning	9.	\$	65.00
o. Pers	sonal care	products and services	10.	\$	100.00
1. Me d	dical and de	ental expenses	11.	\$	265.00
		. Include gas, maintenance, bus or train fare.	40	Φ.	250.00
		car payments.	12.	·	
		, clubs, recreation, newspapers, magazines, and b		\$	125.00
4. Cha	aritable con	tributions and religious donations	14.	\$	0.00
5. Ins ı					
		nsurance deducted from your pay or included in lines		•	
	. Life insur		15a.		0.00
	. Health ins		15b.	: —	0.00
	. Vehicle ir		15c.		334.00
		urance. Specify:	15d.	\$	0.00
		nclude taxes deducted from your pay or included in lir			
•	cify:		16.	\$	0.00
		lease payments:		_	
		nents for Vehicle 1	17a.	·	517.65
		nents for Vehicle 2	17b.	·	154.12
	. Other. Sp			\$	0.00
	. Other. Sp	•	17d.	\$	0.00
		s of alimony, maintenance, and support that you d		Φ.	0.00
		your pay on line 5, Schedule I, Your Income (Office			
		s you make to support others who do not live with		\$	0.00
Spe			19.	_	
		perty expenses not included in lines 4 or 5 of this			0.00
		es on other property	20a.	·	0.00
	. Real esta		20b.	·	0.00
		homeowner's, or renter's insurance	20c.		0.00
20d.	. Maintena	nce, repair, and upkeep expenses	20d.	·	0.00
20e.	. Homeowi	ner's association or condominium dues	20e.	\$	0.00
1. Oth	er: Specify:		21.	+\$	0.00
0 0-1					
	-	monthly expenses		c	4 070 77
		through 21.	-15 40010	\$	4,872.77
22b.	. Copy line 2	22 (monthly expenses for Debtor 2), if any, from Offici	al Form 106J-2	\$	
22c.	. Add line 22	2a and 22b. The result is your monthly expenses.		\$	4,872.77
3 Cale	culate vour	monthly net income.	ļ		
	-	12 (your combined monthly income) from Schedule I	. 23a.	\$	4,761.65
		,	. 23a. 23b.	·	4,872.77
230.	3b. Copy your monthly expenses from line 22c above.		230.	-ψ	4,012.11
230	Subtract	your monthly expenses from your monthly income.			
200.		It is your monthly net income.	23c.	\$	-111.12
	1110 10301	a to your monding not moonly.			
		an increase or decrease in your expenses within			
For e	example, do y	ou expect to finish paying for your car loan within the year or d			r decrease because of a
		e terms of your mortgage?			
	No.				
•					

Fill in this	s information to identify your case:			
Debtor 1	Frank A. McKinney, Jr.			
		Middle Name Las	Name	
Debtor 2	Ida K. McKinney			
(Spouse if, fill	ing) First Name M	fliddle Name Las	Name	
United Sta	ates Bankruptcy Court for the: MD			
Case num	nber			
(if known)				☐ Check if this is an amended filing
Decla	Form 106Dec Aration About an In			12/15
obtaining	file this form whenever you file bank money or property by fraud in conne both. 18 U.S.C. §§ 152, 1341, 1519, an Sign Below	ction with a bankruptcy cas		
Did y	you pay or agree to pay someone wh	o is NOT an attorney to help	you fill out bankruptcy forms?	
•	No			
	Yes. Name of person			nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
	r penalty of perjury, I declare that I ha	ave read the summary and s	chedules filed with this declarat	tion and
X /9	s/ Frank A. McKinney, Jr.	Х	/s/ Ida K. McKinney	
	Frank A. McKinney, Jr.		Ida K. McKinney	
	Signature of Debtor 1		Signature of Debtor 2	
D	Date		Date June 14, 2018	

Fill in	this inforn	nation to identify you	r case:			
Debtor		Frank A. McKinr				
		First Name	Middle Name	Last Name		
Debtor (Spouse		Ida K. McKinney	Middle Name	Last Name		
, .		nkruptcy Court for the:				
0						
(if known	number				_	heck if this is an nended filing
O(i;	: .	407				
		<u>rm 107</u> of Financial <i>i</i>	Affairs for Individ	luals Filing for B	ankruptcv	4/16
Be as o	complete a	nd accurate as possi	ble. If two married people a	are filing together, both are	e equally responsible for sup y additional pages, write you	
Part 1	Give D	etails About Your Ma	rital Status and Where You	ı Lived Before		
1. W	hat is your	current marital statu	ıs?			
	Married Not mar	ried				
2. Du	uring the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	No Yes. Lis	t all of the places you I	ived in the last 3 years. Do n	ot include where you live nov	v.	
D	ebtor 1 Pri	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					nity property state or territory ico, Texas, Washington and W	
■	No Yes. Ma	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part 2	Explai	n the Sources of You	r Income	,		
Fil	I in the tota	I amount of income yo	nployment or from operating ureceived from all jobs and have income that you receive	all businesses, including par		ndar years?
	No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$32,343.48	☐ Wages, commissions, bonuses, tips	\$0.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debt Debt		nk A. McKinne K. McKinney	ey, Jr.		Ca	ase number (if known)	
			Debto	ar 1		Debtor 2	
			Source	ces of income call that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that app	
	last calend luary 1 to I	dar year: December 31, 20	1171	ages, commissions, es, tips	\$65,338.00	☐ Wages, comm bonuses, tips	ssions, \$0.00
			□Ор	erating a business		☐ Operating a bu	siness
		lar year before t December 31, 20	116\ - ***	ages, commissions, es, tips	\$0.00	☐ Wages, comm bonuses, tips	issions, \$0.00
			□Ор	erating a business		☐ Operating a bu	siness
	□ No	ource and the gro	oss income froi	m each source separa	ately. Do not include income	e that you listed in line	4.
			Debto	r 1		Debtor 2	
			Source	es of income be below.	Gross income from each source (before deductions and exclusions)	Sources of incomposition Describe below.	Gross income (before deductions and exclusions)
		1 of current yea iled for bankrup			\$0.00	Social Security	\$3,740.00
	last calend luary 1 to I	dar year: December 31, 20	017)		\$0.00	Social Security	\$11,220.00
Part	3: List	Certain Paymen	ts You Made I	Before You Filed for	Bankruptcy		
		Neither Debtor	1 nor Debtor 2	s primarily consume has primarily consuments al, family, or househo	umer debts. Consumer de	<i>bt</i> s are defined in 11 U	.S.C. § 101(8) as "incurred by an
		During the 90 da	ys before you	filed for bankruptcy, d	id you pay any creditor a to	tal of \$6,425* or more	?
			to line 7.				
		paid not i	that creditor. Include paymer	Do not include payments to an attorney for t	nts for domestic support ob	ligations, such as child	ents and the total amount you d support and alimony. Also, do
	-					on or after the date of t	adjustinent.
	■ Yes.			have primarily consi filed for bankruptcy, d	id you pay any creditor a to	tal of \$600 or more?	
			o line 7.				
		inclu	ıde payments f				ou paid that creditor. Do not so, do not include payments to
	Creditor's	s Name and Add	ress	Dates of payme	ent Total amount paid	Amount you still owe	Was this payment for

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t	otor 2 Ida K. McKinney		Ca	se number (if known)	
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Ocwen Loan Servicing, Llc Attn: Research/Bankruptcy 1661 Worthington Rd Ste 100 West Palm Bch, FL 33409	Within ninety days of filing	\$2,952.00	\$189,330.00	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other
	Santander Consumer USA 5201 Rufe Snow Drive Suite 400 North Richland Hills, TX 76180	Within ninety days of filing	\$1,552.95	\$21,001.00	 □ Mortgage ■ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other
	Within 1 year before you filed for bankrup Insiders include your relatives; any general p corporations of which you are an officer, directincluding one for a business you operate as a support and alimony.	artners; relatives of any ger ctor, person in control, or ov	eral partners; partr vner of 20% or more	nerships of which yo e of their voting sec	ou are a general partner; curities; and any managing agen
	Yes. List all payments to an insider.				
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co No Yes. List all payments to an insider		ments or transfer	any property on a	ccount of a debt that benefite
	Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for this payment
			paid	still owe	Include creditor's name
ì	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures			
	Within 1 year before you filed for bankrup List all such matters, including personal injury modifications, and contract disputes.				
	□ No ■ Yes. Fill in the details.				
	Case title Case number	Nature of the case	Court or agency	1	Status of the case
	Lake Land'Or Property Owners	Collection	Caroline Coun	nty General	■ Pending

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	btor 2 Ida K. McKinney		Case number (if known)	
10.	Within 1 year before you filed for bankrup Check all that apply and fill in the details belo		essed, foreclosed, garnished, attach	ed, seized, or levied?
	No. Go to line 11.Yes. Fill in the information below.			
	Creditor Name and Address	Describe the Property	Date	Value of the property
		Explain what happened		property
	Lake Land'Or Property Owners Assn., Inc.	M & T Bank Checking Account	3/26/2018	\$4,200.00
	555 Welsh Drive	Property was repossessed.		
	Ruther Glen, VA 22546	Property was foreclosed.		
		Property was garnished.		
		☐ Property was attached, seized or l	evied.	
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed No ☐ Yes. Fill in the details.		nk or financial institution, set off any	amounts from your
	Creditor Name and Address	Describe the action the creditor too	ok Date action was taken	Amount
	Yes Itist Certain Gifts and Contributions Within 2 years before you filed for bankrup No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift and	ptcy, did you give any gifts with a tota	al value of more than \$600 per perso Dates you gave the gifts	n? Value
	Address:			
14.	Within 2 years before you filed for bankru No	ptcy, did you give any gifts or contribu	utions with a total value of more tha	n \$600 to any charity?
	Yes. Fill in the details for each gift or co	ntribution.		
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	tal Describe what you contributed	d Dates you contributed	Value
Pai	rt 6: List Certain Losses			
15.	Within 1 year before you filed for bankrup disaster, or gambling?	tcy or since you filed for bankruptcy, o	did you lose anything because of th	eft, fire, other
	■ No □ Yes. Fill in the details.			
		Describe any insurance coverage for the	he loss Date of your	Value of property
	how the loss occurred	nclude the amount that insurance has pa pending insurance claims on line 33 of So Property.	aid. List loss	lost
Pai	rt 7: List Certain Payments or Transfers			

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you

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	otor 1 Frank A. McKinney, Jr. Ida K. McKinney		Case number (if known)	
	consulted about seeking bankruptcy or prepari Include any attorneys, bankruptcy petition prepare		vices required	I in your bankruptcy.	
	□ No ■ Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
	Douglas R. Gorius, PA 511B Eastern Blvd Baltimore, MD 21221-6733 dgorius.esq@comcast.net	Attorney's Fee		4/6/18, 4/13/18, 5/11/18, 5/18/18, 6/11/18	\$850.00
	United States Bankruptcy Court 101 W. Lombard Street Baltimore, MD 21201	Filing Fee Installment		6/14/2018	\$84.00
	CreditInfonet 4540 Honeywell Court Dayton, OH 45424	Credit Report		Before Filing	\$66.00
	Dollar Learning Foundation, Inc. 9030 Hayvenhurst Avenue North Hills, CA 91343	Credit Counseling		6/12/2018	\$30.00
17.	Within 1 year before you filed for bankruptcy, d promised to help you deal with your creditors of Do not include any payment or transfer that you lis	or to make payments to your creditor	behalf pay o s?	r transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.				
	Person Who Was Paid Address	Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busin Include both outright transfers and transfers made include gifts and transfers that you have already list No Yes. Fill in the details.	ness or financial affairs? as security (such as the granting of a s			
	Person Who Received Transfer Address	Description and value of property transferred		ny property or received or debts change	Date transfer was made
	Person's relationship to you				
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protection No		elf-settled tru	st or similar device	of which you are a
	☐ Yes. Fill in the details. Name of trust	Description and value of the propo	erty transferre	ed	Date Transfer was
					made

	tor 1 tor 2	Frank A. McKinney, Jr. Ida K. McKinney	Case number (if known)				
Par	t 8:	List of Certain Financial Accounts, In	struments, Safe Deposi	t Boxes, and Stor	rage Unit	ts	
20.	sold, Includ house	n 1 year before you filed for bankrupto moved, or transferred? de checking, savings, money market, on es, pension funds, cooperatives, asso No Yes. Fill in the details.	or other financial accou	nts; certificates o	of deposi		
		e of Financial Institution and Pess (Number, Street, City, State and ZIP	Last 4 digits of account number	Type of accountinstrument	t or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	cash,	ou now have, or did you have within 1 or other valuables?	year before you filed for	bankruptcy, any	safe de	posit box or other deposi	tory for securities,
		No Yes. Fill in the details.					
	Nam	e of Financial Institution 'ess (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		escribe)	the contents	Do you still have it?
22.	— N	you stored property in a storage unit on No Yos. Fill in the details.	or place other than your	home within 1 y	ear befo	re you filed for bankrupto	y?
		e of Storage Facility 'ess (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		escribe	the contents	Do you still have it?
Par	9:	Identify Property You Hold or Control	for Someone Else				
23.	Do yo	ou hold or control any property that so omeone. No Yes. Fill in the details.		ude any property	you bor	rowed from, are storing f	or, or hold in trust
	Own	er's Name 'ess (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		escribe	the property	Value
Par	10:	Give Details About Environmental Inf	ormation				
		rpose of Part 10, the following definiti					
	toxic	conmental law means any federal, state substances, wastes, or material into t ations controlling the cleanup of these	he air, land, soil, surfac	e water, groundw	• .		
	Site n	neans any location, facility, or propert n, operate, or utilize it, including disp	y as defined under any		w, wheth	er you now own, operate	, or utilize it or used
		rdous material means anything an env dous material, pollutant, contaminant		as a hazardous w	vaste, ha	zardous substance, toxid	substance,
Rep	ort all	notices, releases, and proceedings th	at you know about, rega	ardless of when t	hey occı	ırred.	
24.	Has a	nny governmental unit notified you tha	t you may be liable or p	otentially liable u	nder or i	in violation of an environ	mental law?
	_ `	No Yes. Fill in the details.					
	_		Governmental	it	Envir	onmental law if you	Date of nation
		e of site Tess (Number, Street, City, State and ZIP Code)	Governmental un Address (Number, S ZIP Code)		know	onmental law, if you it	Date of notice

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	otor 2	Ida K. McKinney		Cas	se number (if known)	
۰-			f			
25.	Have	you notified any governmental unit o	f any release of hazardous material?			
		No				
		Yes. Fill in the details.				
		ne of site ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State ar ZIP Code)	nd	Environmental law, if you know it	Date of notice
26.	Have	you been a party in any judicial or ad	ministrative proceeding under any env	viron	mental law? Include settlements	and orders.
	_	No Yes. Fill in the details.				
		e Title e Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case
Par	rt 11:	Give Details About Your Business or	Connections to Any Business			
27.	With	in 4 years before you filed for bankrup	otcy, did you own a business or have a	iny of	the following connections to ar	y business?
		☐ A sole proprietor or self-employed	in a trade, profession, or other activity	, eith	ner full-time or part-time	
		☐ A member of a limited liability com	pany (LLC) or limited liability partners	hip (I	_LP)	
		☐ A partner in a partnership				
		☐ An officer, director, or managing ex	xecutive of a corporation			
		☐ An owner of at least 5% of the voti	ng or equity securities of a corporation	า		
		No. None of the above applies. Go to	Part 12.			
	_	••	II in the details below for each busines	ss.		
		iness Name	Describe the nature of the business		Employer Identification number	
		ress ber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security Dates business existed	number or ITIN.
28.		in 2 years before you filed for bankrup autions, creditors, or other parties.	otcy, did you give a financial statement	to a	nyone about your business? Inc	ude all financial
		M-				
	_	No Yes. Fill in the details below.				
	Nam	ne	Date Issued			
		ress ber, Street, City, State and ZIP Code)				
Pai	rt 12:	Sign Below				
I ha	ve rea true a ı a baı	d the answers on this <i>Statement of Fi</i> nd correct. I understand that making a	inancial Affairs and any attachments, a a false statement, concealing property \$250,000, or imprisonment for up to 2	, or o	btaining money or property by fi	
		k A. McKinney, Jr.	/s/ Ida K. McKinney			
		. McKinney, Jr. e of Debtor 1	Ida K. McKinney Signature of Debtor 2			
Dat	te J	une 14, 2018	Date June 14, 2018			
Did	you a	ttach additional pages to <i>Your Statem</i>	ent of Financial Affairs for Individuals	Filin	g for Bankruptcy (Official Form	107)?
					, , ,	•
	'es					
Did ■ N		ay or agree to pay someone who is no	ot an attorney to help you fill out bankr	uptc	y forms?	
		ame of Person . Attach the Bankr	ruptcy Petition Preparer's Notice, Declara	tion,	and Signature (Official Form 119).	
	ial Forn		ment of Financial Affairs for Individuals Filing		,	page 7

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Debtor 1 Frank A. McKinney, Jr.
Debtor 2 Ida K. McKinney Case number (if known)

United States Bankruptcy Court MD

In re	Frank A. McKinney, Jr. Ida K. McKinney		Case No.
	•	Debtor(s)	Chapter 7
Γhe abo		TICATION OF CREDITOR	
Date:	June 14, 2018	/s/ Frank A. McKinney, Jr.	
		Frank A. McKinney, Jr.	
		Signature of Debtor	
Date:	June 14, 2018	/s/ Ida K. McKinney	
	· · · · · · · · · · · · · · · · · · ·	Ida K McKinney	

Signature of Debtor

Bay Country Consumer Finance, Inc. 6619 Ritchie Highway Suite 13 Glen Burnie, MD 21061

Caroline County, Virginia P.O. Box 447 Bowling Green, VA 22427

Caroline County, Virginia P.O. Box 431 Bowling Green, VA 22427

Chadwick, Washington, Moriarty, Elmore & Bunn, P.C. 3201 Jermantown Rd. Suite 600 Fairfax, VA 22030

Commonwealth of Virginia Department of Taxation PO Box 1115 Richmond, VA 23218

Diversified Consultants, Inc. Diversified Consultants, Inc. Po Box 551268 Jacksonville, FL 32255

ERC/Enhanced Recovery Corp 8014 Bayberry Rd Jacksonville, FL 32256

I C System Inc 444 Highway 96 East P.O. Box 64378 St. Paul, MN 55164 Kohls/Capital One Kohls Credit Po Box 3120 Milwaukee, WI 53201

Lake Land'Or Property Owners Assn., Inc. 555 Welsh Drive Ruther Glen, VA 22546

Lake Land'Or Property Owners Association c/o Chadwick Washington Moriarty Elmore & Bunn P.C. 201 Concourse Blvd. Suite 101 Glen Allen, VA 23059

Midland Funding 2365 Northside Dr Ste 300 San Diego, CA 92108

Midnight Velvet Swiss Colony/Midnight Velvet 1112 7th Ave Monroe, WI 53566

National Recovery Agency Attn: Bankruptcy Po Box 67015 Harrisburg, PA 17106

Ocwen Loan Servicing, Llc Attn: Research/Bankruptcy 1661 Worthington Rd Ste 100 West Palm Bch, FL 33409

Profburcol 5295 Dtc Parkway Greenwood Village, CO 80111 Receivable Management Inc 7206 Hull Rd Ste 211 Richmond, VA 23235

Recovery One Llc 3240 Henderson Rd Columbus, OH 43220

Santander Consumer USA 5201 Rufe Snow Drive Suite 400 North Richland Hills, TX 76180

Verizon Verizon Wireless Bk Admin 500 Technology Dr Ste 550 Weldon Springs, MO 63304

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